

Food Marketing to Kids Workshop  
Comment and Request to Participate  
Project No. P034519

Commenters:

Debra L. Scammon, Ph.D.

Associate Dean for Academic Programs and Emma Eccles Jones Professor of Marketing  
David Eccles School of Business, University of Utah

Teresa M. Pavia, Ph.D.

Associate Professor of Marketing, David Eccles School of Business, University of Utah

Deirdre T. Guion, Ph.D., Assistant Professor of Marketing, Saint Josephs University

Jenny Mish, doctoral student,

Department of Marketing, David Eccles School of Business, University of Utah

Expertise of Commenters:

Debra Scammon has been working in the area of nutrition for 30 years. Her research includes studies of consumers' understanding of nutrition labeling and nutrition advertising. Most recently she has studied consumers' use of dietary supplements and their understanding of disclaimers. Scammon was a Visiting Scholar at the Federal Trade Commission and has coordinated several special journal issues and conference sessions on nutrition. She is past editor of the Journal of Public Policy & Marketing.

Teresa Pavia has worked extensively in the area of consumer behavior related to health issues. She has successfully employed a variety of qualitative methods to develop a deep understanding of consumers' health behaviors focusing on consumers dealing with life-threatening and changing diseases, families with children with special needs, and individuals with disabilities. Her current work investigates parents' perceptions of overweight children.

Deirdre Guion recently completed an extensive study of American consumers' eating practices as part of her doctoral dissertation in the marketing department at the University of Utah. Her past work has included examination of the constrained food choices of welfare recipients, the support available to the needy from food banks and other community service agencies, and the impact of time and competing activities on family eating practices. Guion has past industry experience in brand management with the cereal division of General Mills. She also was co-owner of a boutique advertising agency and is author of a cookbook, "Grandmas Hands: the Heart & Soul of New Orleans Cooking."

Jenny Mish's past work has taken a broader perspective, examining the food system and the interplay of multiple forces in determining the structure and composition of the system. Her current work explores what food options are available on school campuses

and who makes decisions about available options. She is beginning research on what foods consumers believe are healthy and how they build such foods into their diets. Mish is a doctoral student in the marketing department at the University of Utah.

The four of us have been engaged in several research projects over the past several years dealing with various aspects of the environment within which children (and their parents) make food choices. Collectively, our research adds perspective on a number of issues raised by the list of topics the FTC and HHS plan to include in the July workshop on childhood obesity. Specifically, we can comment upon:

1. Food and beverage marketing to children

- a. One of our projects involved exploration with middle- and high schools to better understand the food options available on school campuses to students and how decisions regarding those options were made. This study included extensive literature search, observations and interviews with food service directors and school principals.<sup>1</sup> It revealed several important aspects of the environment on school campuses that impact students' food intake.
  - i. Vending machines are an important determinant of what food items are available on school campuses. Most vending machines are stocked primarily with unhealthy snack and drink options. Schools generally receive a "signing bonus" from the food manufacturers whose products are stocked in the vending machines. These incentives are a major source of revenue for many schools. Self-regulatory guidelines should go beyond advertising practices and cover the full range of marketing activities including placement incentives, contributions to advocacy organizations, and other corporate marketing activities.

Both schools and food manufacturers can affect the vending environment through their contract negotiations. We found that a variety of companies ranging from small local distributors to large national producers such as Stoneyfield Farms and PepsiCo have negotiated contracts with schools for healthier vending items.

It is important to note that in addition to the signing bonuses, schools benefit from revenues generated by sales from the vending machines. School districts are beginning to experiment with stocking vending machines with healthier items. Some report increased revenues while others report no losses (compared to stocking less healthful items) and none that we found reported lost revenue by switching to healthier vending options. Self-regulation by food manufacturers regarding the quality of vending options made available to schools should be considered.

- ii. Food distributors also play a major role in determining what food items are available on school campuses. Through the quantity discounts they offer schools distributors have the power to influence what items are offered in a la carte lines as well as in school breakfast and school lunch programs. In addition to food costs, it is important to recognize the role that food distributors play in providing nutrition information to schools. We found one school district that offered higher commissions and more favorable pricing of more healthful items through a particularly innovative request for bids (Fayette County Public Schools in Lexington Kentucky).

In addition to food costs, it is important to recognize the role that food distributors play in providing nutrition information to schools. Unlike foods sold at retail, bulk foods purchased at wholesale do not carry nutrition labels. Most schools do not have dietitians or nutritionists involved in school menu planning and there are no national standards for educational background or training for food service directors. It is critical that food service personnel have reliable and usable information about the nutritional content and quality of food items they purchase. The companies that supply foods to schools – both producers and distributors – should be required to take more affirmative actions to ensure nutrition information is made available to school personnel.

## 2. Education

- a. Another one of our projects investigated eating practices of American consumers.<sup>2</sup> Through long interviews with parents that included specific questions about their overall level of knowledge about nutrition we learned that parents felt they had adequate, if not above average, knowledge of nutrition and healthy eating practices. Despite this self-reported high level of knowledge, parents stated that they did not always use their knowledge and eat the way they should. One informant commented that no one could keep up with the federal guidelines and eat as many fruits, vegetables and grains as suggested. Another informant said, “knowing what to do and doing it are different things.”

This study also revealed an aversion to vegetables by both parents and children. Some families included vegetables in their meals, but did not venture much beyond salad and broccoli. This highlights the need to change the image of healthy foods so that they become seen as more desirable. Advertisers should be enlisted to assist develop an image change strategy in which healthy foods are portrayed as cool and are given media prominence equal to that of processed foods.

Consumers may behave in ways contrary to their “knowledge.” Findings of such contradiction are common in the realm of health behaviors (e.g., smokers well aware of the negative consequences of smoking) and reinforce the necessity of considering education in its broadest sense. Nutrition information and facts about healthy eating practices are essential. But education programs should go beyond information and include suggestions for families as to what foods to include in a healthy diet, how to shop for and prepare healthy meals, how to engage the whole family in meal preparation, the benefits of families sharing meal times together, and strategies for healthy eating in a time constrained schedule.

Our research revealed that many parents had not learned how to cook when they were growing up. This observation not only suggests that helpful hints on meal planning and preparation would be useful, it also suggests that cooking and eating are devalued in our current society and are likely to be seen merely as a chore and a “necessary evil.” This likely is one attraction of fast foods and an important aspect of the environment of food and eating to understand. Strategies for helping parents and children appreciate the value of shared meal times and for taking the stress out of meal time should be developed.

- b. Parents could also benefit from education to help them recognize the signs of obesity in children and to support them with strategies for dealing with it. In a study with parents we learned that “baby fat” is considered cute (and thus acceptable) until about age 8-9.<sup>3</sup> This research suggests that the image parents have of an overweight child is one who has no friends, can’t keep up while participate in physical activities, and whose clothes no longer fit. If their child does not fit this image, parents are not likely to view their child as overweight. Helping parents recognize the signs that weight may be (or is becoming) a problem is important. This study also suggested that parents expect pediatricians to identify overweight children and, in the absence of input from a physician, believe that their child is not at risk. The discussion of issues of obesity and strategies of prevention between physicians with parents as well as between parents with children should be encouraged. Such discussions offer an opportunity for better information sharing and attitude/habit formation that could lead to healthier lifestyles. In an unrelated study several years ago, it was learned that many physicians did not know how to talk with their patients about physical exercise. We suspect this may also be the case with regard to healthy eating practices. As part of an obesity education program, scripts should be developed for physicians to assist them in having conversations about eating and exercise with their patients. Additional scripts may be needed for parents to use in talking with their children. Much like the clinical guidelines developed around best practices for disease management, guidelines for nutrition management should be developed. These guides should include not just what to eat or avoid eating but also

how to prepare foods (as noted above). We recommend that physicians be encouraged to write “eating prescriptions” for their patients who are at risk of becoming overweight or obese.

3. Role of positive nutritional messages

- a. Both our study of school food programs and our study of American eating practices led to the identification of time as an important element of the environment of food in today’s lifestyles. We discovered that for some schools, the pressure to manage behavior problems and the constraints of over-crowded schools led them to schedule lunch periods so short that students did not have adequate time to eat (sometimes as little as 15-20 minutes). We also discovered through eating diaries completed by parents that formal meal times were frequently non-existent and that food was consumed in 5-10 minutes while “on the go.” Experts generally agree that it takes at least 20 minutes for the brain to register satiety. The limited time devoted to eating, both at school and at home, raise the question of whether children are able to listen to their own bodies regarding needed food intake. Part of a positive nutritional message should stress the desirability of eating more slowly and savoring taste and sociability.

In summary, data from a collection of research projects in which we have been involved suggest that to have an impact on the health status of children, it is important to consider the complex environment in which food consumption choices are made. In addition to advertising and product design, it is important to examine the role played by the full range of marketing activities that are employed (including distribution and pricing strategies) and those entities that influence the availability of food options (food producers, food distributors, school purchasing and meal planning personnel, parents).

Our research suggests that education programs directed to children, parents, physicians, and school food service personnel, at the least, would be beneficial. These programs should go beyond the provision of information and include motivation, opportunity, and protocols for making changes in eating practices. An important element of such programs will be strategies for changing the image of healthful foods so that they are seen as more desirable and accessible. We strongly recommend taking an integrated approach in order to enhance the likelihood of positive impacts on the health of our children.

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<sup>1</sup> Scammon, Debra L., Jenny Mish, and Deirdre T. Guion, “Who’s in Charge of School Nutrition? An Exploratory Analysis of Middle- and High School Food Policies and Practices” presented at the Marketing and Public Policy Conference, Washington, D.C., May 2005. Editors Jeff Langenderfer, Don Lloyd Cook, and Jerome D. Williams, Proceedings of the 2005 Marketing and Public Policy Conference, Vol. 15, pp 160-161.

<sup>2</sup> Guion, Deirdre T., “Complex Consumption: An Analysis of American Eating Practices,” doctoral dissertation, University of Utah, April 2005.

<sup>3</sup> Pavia, Teresa M. “Caregiver Perceptions of the Causes and Markers of Childhood Overweight” presented to the Marketing and Public Policy Conference, Washington, D.C., May 2005. Editors Jeff Langenderfer,

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Don Lloyd Cook, and Jerome D. Williams, Proceedings of the 2005 Marketing and Public Policy Conference, Vol. 15, pp 158-159.